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CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/682,303-Conf. #7332
	Filing Date	October 9, 2003
	First Named Inventor	Raul Trillo
	Art Unit	1617
	Examiner Name	S. J. Jean-Louis
	Attorney Docket No.	31203/30056

Please change the Correspondence Address for the above-identified application to:

☒ The address associated with Customer Number:

OR

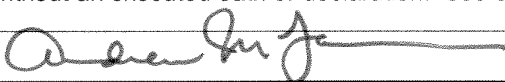
<input type="checkbox"/> Firm or Individual Name					
Address					
City		State		Zip	
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Telephone				Email	

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor
☐ Assignee of record of the entire interest.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☒ Attorney or agent of record. Registration Number 46,130.
☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Signature



Typed or Printed Name

Andrew M. Lawrence

Date

September 28, 2010

Telephone

(312) 474-6300

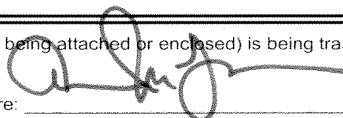
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐
*Total of 1 forms are submitted.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: September 28, 2010

Signature:



(Andrew M. Lawrence)